### DEPARTMENT OF THE ARMY



HEADQUARTERS US ARMY GARRISON 2837 BOYD AVENUE FORT HUACHUCA ARIZONA 85613-7001

ATZS-CDR (600) 26 November 2003

#### MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: POLICY--Suicide Prevention

#### 1. References:

- a. AR 600-85, Army Substance Abuse Program (ASAP), 01 October 2001.
- b. Chapter 5, Suicide Prevention and Psychological Autopsy, to AR 600-63, Army Health Promotion, 28 April 1996.
  - c. DA Pamphlet 600-24, Suicide Prevention and Psychological Autopsy, 30 September 1988.
- d. Memorandum, TRADOC, ATBO-F, 6 Mar 00, subject: TRADOC Suicide Prevention Program (TSPP).
- e. Memorandum, US Army Intelligence Center and Fort Huachuca, ATZS-CG, 9 August 2001, subject: Applied Suicide Intervention Skills Training (ASIST).
- f. Memorandum, TRADOC, ATBO-ZI, 21 Mar 03, subject: The Tragedy of Suicide TRADOC Prevention Efforts.
- 2. Suicide prevention is a Commander's program and responsibility. It is accomplished through caring; a positive leadership presence; strong policy and direction; sensitive awareness and training in timely suicide risk identification and suicide prevention; effective intervention; and concerned and responsive follow-on care.
- a. Leaders at all echelons must be alert to discern and train their subordinates to recognize potential suicide danger signals such as apparent feelings of worthlessness, hopelessness or helplessness, withdrawal from family and friends, increased time spent alone, alcohol or drug abuse, loss of interest or pleasure in usual activities, changes in appetite or weight, talk about

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suicide, giving away possessions, obsession with death, and changes in sleep habits. Also important is listening to an individual as cues and clues are often in his or her words. Established with this policy is the new requirement for all privately owned weapons on post to be registered with Directorate of Public Safety (DPS). This will improve the capability of commanders to quickly identify at-risk soldiers who have such weapons in their possession. Additionally, all commanders and leaders are strongly encouraged to obtain ASIST for all first-line supervisors, cadre, and drill sergeants. The ASIST is mandatory for units in which suicide behavior and other high rates of Risk Reduction problems occur.

- b. Leaders will make every effort to widely disseminate information on helping agencies and sources of support. They are:
- (1) the Raymond W. Bliss Army Health Clinic, Behavioral Health Services, 0730-1630, 533-5161/7030; Sierra Vista Regional Health Center, Emergency Room (ER), 417-3060. (Provide suicide assessment and counseling. First point of contact for suicide assessment, treatment, and referral, if necessary)
- (2) the Office of the Family Life Chaplain, 533-4748; After-hours, 533-2624/2291. (Provide suicide awareness and prevention training to assist commanders with identification of at-risk personnel and conduct quarterly ASIST training.)
- (3) and the Army Substance Abuse Program/Risk Management & Employee Assistance Services, 538-1286/1397 (oversee the incorporation of the Installation Prevention Team and ensure the Installation Suicide Prevention Committee meets at least biannually.) Also report statistical information on the ASAP Risk Reduction Program to Mr. Vern Hunter, Alcohol and Drug Control Officer (ADCO), vern.hunter@us.army.mil.
- 3. Disseminate and encourage the use of TRADOC suggested websites and phone numbers, i.e., <a href="https://doi.org/nc.nc/he-numbers-nc-numbers
- 4. Every commander, soldier, family member, supervisor, and civilian plays an important part in suicide prevention. Every member of the Fort Huachuca family has the potential to come in contact with a person who is at an increased risk of suicide and, therefore, must be part of the solution.
- 5. The proponent for this policy is the US Army Garrison, Army Substance Abuse Program, extension 538-1286.

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6. This memorandum supersedes policy memorandum, ATZS-CDR, 17 June 2003, subject as above.

//original signed//

LAWRENCE J. PORTOUW

COL, MI

Commander, US Army Garrison

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